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NORTHERN	TATES DISTRICT DISTRICT OF CA CAND 435 AND Rev. 08/2018)		TRANSCRIPT ORDER Please use one form per court reporter. CJA counsel please use Form CJA24 Please read instructions on next page.									COURT USE ONLY DUE DATE:				
1a. CONTACT PERSON FOR THIS ORDER				2a. CONTACT PHONE NUMBER					3. CONTACT EMAIL ADDRESS							
1b. ATTORNEY NAME (if different)				2b. ATTORNEY PHONE NUMBER					3. ATTORNEY EMAIL ADDRESS							
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE)						5. CASE NAME						6. CASE NUMBER				
		8. THIS	8. THIS TRANSCRIPT ORDER IS FOR:													
7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX) \rightarrow \square FTR						□ APPEAL □ CRIMINAL □ In forma pauperis (NOTE: Court order for transcripts must be attached) □ NON-APPEAL □ CIVIL CJA: Do not use this form; use Form CJA24.										
9. TRANSCRIP	T(S) REQUESTED (Specify portion	on(s) and date(s) of proce	eding(s) for which	transcript	is requested	l), format(s) &	& quantity ar	nd delivery	type:						
a HEARING(S) (OR PORTIONS OF HEARINGS)						FORMAT(S) (NOTE: ECF access is included rchase of PDF, text, paper or condensed.)				c. DELIVERY TYPE (Choose one per line)						
DATE	JUDGE (initials)	TYPE (e.g. CMC)	PORTION If requesting less than full heari specify portion (e.g. witness or ti	PDF ing, (email) me)	TEXT/ASCII (email)	PAPER	CONDENSED (email)	ECF ACCESS (web)	ORDINARY (30-day)	14-Day	EXPEDITED (7-day)	3-DAY	DAILY (Next day)	HOURLY (2 hrs)	REALTIME	
				0	0	0	0	0	0	0	0	0	0	0	0	
				0	0	0	0	0	0	0	0	0	0	0	0	
				0	0	0	0	0	0	0	0	0	0	0	0	
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				0	0	0	0	0	0	0	0	0	0	0	0	
				0	0	0	0	0	0	0	0	0	0	0	0	
10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:																
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional). 11. SIGNATURE											12. DA	TE				